

AUTHORIZED UTILITY REPRESENTATIVE FORM FOR TELECOMMUNICATIONS CARRIERS

TYPE: ☐ IXC

☒ CLEC

☐ ILEC

☒ Wireless

2012-39A

239298

CERTIFICATED COMPANY INFORMATION

Mitel Netsolutions, Inc.

Company Name

Db/a/fka

7300 W. Boston St.

Telephone #

Mailing Address

Chandler, AZ 85226

City, State, Zip Code

Same as above

Business Location

City, State, Zip Code

County

REGISTERED AGENT INFORMATION

Registered Agent: Prentice Hall Corp System

Mailing Address: 1703 Laurel St, Columbia, SC 29201

City, State, Zip Code

Pursuant to the Commission's rules and regulations, print or type company contact for the following areas:

A. **General Manager** (Include Address if different than above)

Telephone Number / Facsimile Number / E-mail Address

B. **Customer Relations/Complaints Representative** (Include Address if different than above)

Telephone Number / Facsimile Number / E-mail Address

C1. **Customer Relations/Complaints Representative for Escalated Complaints** (Include Address if different than above)

Telephone Number / Facsimile Number / E-mail Address

C2. **Customer Contact** (Toll Free Number)

D. **Engineering Operations** (Include Address if different than above)

Telephone Number / Facsimile Number / E-mail Address

E. **Test and Repair** (Include Address if different than above)

Telephone Number / Facsimile Number / E-mail Address

F. **Emergencies** (During Non-Office Hours)

Telephone Number / Facsimile Number / E-mail Address

In addition, please provide the following company contact information to assist in proper routing of correspondence and invoices:

G. **Regulatory Officer** (Include Address if different than above)

Telephone Number / Facsimile Number / E-mail Address

H. **Dual Party Mailings** (Name)

(Mailing Address)

Telephone Number / Facsimile Number / E-mail Address

I. **Interim LEC Fund Mailings** (Name)

(Mailing Address)

Telephone Number / Facsimile Number / E-mail Address

J. **Universal Service Fund Mailings** (Name)

7300 W. Boston St., Chandler, AZ 85226

(Mailing Address)

480-449-8900 x18043 / 480-784-4395 / lainej.jacobsen@mitel.com ← underscore (not dash)

Telephone Number / Facsimile Number / E-mail Address

K. **Gross Receipts Mailings** (Name)

(Mailing Address)

Telephone Number / Facsimile Number / E-mail Address

L. **Lifeline Mailings** (Name)

(Mailing Address)

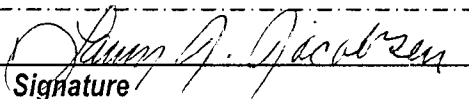
Telephone Number / Facsimile Number / E-mail Address

Lainej Jacobsen

This form was completed by

Tax Supervisor

Title


Signature

/ 9/11/12

Date

RETURN COMPLETED FORM TO:

Public Service Commission of SC
Docketing Department
Post Office Drawer 11649
Columbia, South Carolina 29211
And
Office of Regulatory Staff
Attn: Jeanne Gordon
1401 Main Street, Suite 900
Columbia, South Carolina 29201